

| POSITION                         | INITIALS   | ID NO.         | DATE            |
|----------------------------------|------------|----------------|-----------------|
| <b>FEES DETERMINATION</b>        | <i>PLS</i> |                | <i>06/05/01</i> |
| <b>O.I.P.E. CLASSIFIER</b>       |            | <i>20</i>      | <i>6/15</i>     |
| <b>FORMALITY REVIEW</b>          | <i>B2</i>  | <i>SC3-883</i> | <i>07-31-01</i> |
| <b>RESPONSE FORMALITY REVIEW</b> | <i>H.L</i> | <i>1079</i>    | <i>10/29/01</i> |

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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